510(k) Summary K100151

MAY 2 8 2010

K100151

OMNI life science Apex Hip System Bipolar Head

Submitter

OMNI life science, Inc.

Contact Robert Zoletti

50 O'Connell Way

VP Regulatory Affairs

E. Taunton MA 02718

774-226-1845

Preparation Date

April 8, 2010

Device Name

Common Name Hemi-hip prosthesis, uncemented

Trade Name Apex Hip System Bipolar Head

Classification Name Hip joint femoral (hemi-hip) metal/polymer cemented or uncemented prosthesis

Orthopedic (OR)

Regulatory Class

Class II per 21 CFR §888.3390

Product Code

KWY

Legally Marketed Predicate Device(s) Apex Hip System Bipolar Head K 082468, K945793, K931655

Device Description

The Apex Hip System Bipolar Head consists of a factory assembled Ultra High Molecular Weight Polyethylene (UHMWPE) liner in a cobalt chrome outer shell and UHMWPE retention ring with a Ti-6Al-4v spring. These bipolar heads include outer diameters ranging from 38 to 60 mm, in 1 mm increments, to properly fit the patient anatomy. The smaller bipolar heads (38 to 42 mm) have an inner diameter that mates with a 22 mm diameter femoral head; the larger bipolar heads (43 mm to 60 mm) have an inner diameter that mates with a 28 mm diameter femoral head. The Apex Hip System Bipolar Head may be used in conjunction with an Apex Hip System femoral stem (K060072) for hemiarthroplasty.

Indications for Use

The indications have not changed from the predicate. The Apex Hip System Bipolar Head is intended for use in combination with an Apex Hip System femoral stem for uncemented primary or revision hemiarthroplasty of the hip. This prosthesis may be used for the following conditions, as appropriate:

- Femoral neck and trochanteric fractures of the proximal femur;
- Osteonecrosis of the femoral head:
- Revision procedures where other devices or treatments for these indications have failed.

Predicate Device Comparison

The Apex Hip System Bipolar Head is identical to the Apex Hip System Bipolar Head cleared in K082468 with the following exceptions:

- The UHMWPE (ASTM F-648) retaining ring in the Acetabular component was modified to increase the amount of interference/overlap between the retaining ring and the head.
- A Retaining Spring (Ti-6Al-4V Eli) was added to the UHMWPE Retaining Ring.

Non-Clinical Test Summary

The following tests were conducted:

- Push-out and lever-out testing.
- Locking ring spring storage heat tolerance test (150°F).
- ETO sterilization validation, SAL 10⁻⁶

Clinical Test Summary

No clinical studies were performed.

Conclusions

The Apex Hip System Bipolar head is substantially equivalent to the predicate device.

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Food and Drug Administration 10903 New Hampshire Avenue Document Control Room –WO66-G609 Silver Spring, MD 20993-0002

OMNI Life Science, Inc. % Mr. Robert Zoletti VP Regulatory Affairs 175 Paramount Drive Raynham, MA 02767

MAY 2 8 2010

Re: K100151

Trade/Device Name: Apex Hip System Bipolar Head

Regulation Number: 21 CFR 888.3390

Regulation Name: Hip joint femoral (hemi-hip) metal/polymer cemented or uncemented

Regulatory Class: Class II Product Code: KWY Dated: May 21, 2010 Received: May 26, 2010

Dear Mr. Robert Zoletti:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

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forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Mark N. Melkerson

Director

Division of Surgical, Orthopedic, and Restorative Devices Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

K100151

Indications for Use

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 Revision procedures where other devices or treatments for these indications have failed.
Prescription Use X AND/OR Over-The-Counter Use (21 CFR 801 Subpart C)
(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE IF NEEDED)
Concurrence of CDRH, Office of Device Evaluation (ODE)
(Division Sign of Surgical, Orthopedic,
and Restorative Devices
510(k) Number K100151

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